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FILING/RECEIPT DATE FIRST NAMED APPLICANT ATTORNEY DOCKET NO./TITLE

09/061,568

APPLICATION NUMBER

04/16/98

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0232/0519

AUDLEY A CIAMPORCERO JR ONE JOHNSON AND JOHNSON PLAZA NEW ERUNSWICK NJ 08933-7003 NOT ASSIGNED

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DATE MAILED:

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NOTICE TO FILE MISSING PARTS OF APPLICATION Filing Date Granted

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filling a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of \$65.00 for a small entity in compliance with 37 CFR 1.27, or \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

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☐ 1. The statutory basic filing fee is: ☐ missing.		•
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Additional claim fees of \$, including any multiple dependent claim fees, are rec	quired.
\$for	independent claims over 3.	• •
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The oath or declaration: is missing or unexecuted. does not cover the newly submitted ite	ame	Light P.
does not identify the application to whi	ich it applies. foreign country of applicant's residence.	Capen
An oath or declaration in compliance with the above Application Number and Eiling.	37 CFR 1. 63, including residence information and identify Date is required.	'ing the application by
1.43 or 1.47.	n is/are by a person other than inventor or person qualified	
A properly signed oath or declaration in co Application Number and Filing Date, is red	ompliance with 37 CFR 1.63, identifying the application by quired.	the above
☐ 5. The signature of the following joint inventor)61568
An oath or declaration in compliance with inventor(s), identifying this application by	37 CFR 1.63 listing the names of all inventors and signed the above Application Number and Filing Date, is required.	÷ ·
☐ 6. A \$50.00 processing fee is required since y	your check was returned without payment (37 CFR 1.21(m	100750
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